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APPLICANTS

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** CONTINUING DATA ****

NONE *AC*

** FOREIGN APPLICATIONS ****

NONE *AC*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 05/08/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after <i>Allowance</i>	TX	DRAWING 7	CLAIMS 26	CLAIMS 8
Verified and Acknowledged <i>Applicant's Signature</i>	<i>AC</i>				
	Examiner's Signature	Initials			

ADDRESS

46033
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TITLE

System and method for customized e-mail services

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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